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Name Rebekah ParkSignature [Signature]Date 07-11-2005

PTO/SB/21 (09-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/601,522	
	Filing Date	06/24/2003	
	First Named Inventor	SUK SONG OH	
	Art Unit	3732	
	Examiner Name	STOKES, CANDICE CAPRI	
Total Number of Pages in This Submission	4	Attorney Docket Number	1627.03

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks PTO-2038 FORM		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	PARK & SUTTON LLP		
Signature	<u>[Signature]</u>		
Printed name	JOHN K. PARK		
Date	07-11-2005	Reg. No.	37,904

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Signature	<u>[Signature]</u>		
Typed or printed name	REBEKAH PARK	Date	07-11-2005

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JUL 11 2005

PTO/SB/17 (12-04v2)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known Application Number 10/601,522 Filing Date 06/24/2003 First Named Inventor SUK SONG OH Examiner Name STOKES, CANDICE CAPRI Art Unit 3732 Attorney Docket No. 1627.03	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT	(\$)	180.00	

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
☒ Deposit Account Deposit Account Number: 16-0310 Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 20 or HP =	x	=
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HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 3 or HP =	x	=
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HP = highest number of independent claims paid for, if greater than 3.

Small Entity Fee (\$)

50 25

200 100

360 180

Multiple Dependent Claims

Fee (\$)

Fee Paid (\$)

07/12/2005 TLU111 00000028 10601511

01 FC:1806

100.00 OP

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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- 100 =	/ 50 =	(round up to a whole number) x	=
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4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Information Disclosure Statement

Fees Paid (\$)

\$180.00

SUBMITTED BY

Signature

Registration No. 37,904
(Attorney/Agent)

Telephone 213-389-3777

Name (Print/Type) John K. Park

Date 07-11-2005

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/08A (08-03)

Approved for use through 07/31/2006. OMB 0851-0031

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<p>Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a currently valid OMB control number.</p> <p>Substitute for form 1449/PTO</p> <p style="font-size: 1.2em; font-weight: bold; text-align: center;">INFORMATION DISCLOSURE STATEMENT BY APPLICANT</p> <p style="text-align: center;">(Use as many sheets as necessary)</p>		<p>Complete if Known</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>10/601,522</td> </tr> <tr> <td>Filing Date</td> <td>06/24/2003</td> </tr> <tr> <td>First Named Inventor</td> <td>SUK SONG OH</td> </tr> <tr> <td>Art Unit</td> <td>3732</td> </tr> <tr> <td>Examiner Name</td> <td>STOKES, CANDICE CAPRI</td> </tr> <tr> <td>Attorney Docket Number</td> <td>1627.03</td> </tr> </table>		Application Number	10/601,522	Filing Date	06/24/2003	First Named Inventor	SUK SONG OH	Art Unit	3732	Examiner Name	STOKES, CANDICE CAPRI	Attorney Docket Number	1627.03
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Attorney Docket Number	1627.03														

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Sheet	1	of	1
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Complete If Known

Application Number	10/601,522
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Attorney Docket Number	1627.03

Filing Date	06/24/2003
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First Named Inventor	SUK SONG OH
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Art Unit	3732
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Examiner Name	STOKES, CANDICE CAPRI
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Attorney Docket Number	1627.03
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[illegible][illegible]

Examiner Signature		Date Considered	
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. ⁶ Applicant is to place a check mark here if English language translation is attached.

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